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Bryan A. Santarelli GRAYBEAL JACKSON HALEY LLP Suite 350  155 - 108th Avenue NE Bellevue, WA 98004-5901  APPLICATION NO. FILIND DATE  FIRST NAMED INVENTOR  APPLICATION NO. FILIND DATE  APPLI	maintenance fee notifications.  CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying			
Bryan A. Santarelli GRAYBEAL JACKSON HALEY LLP Suite 350 155 - 108th Avenue NE Bellevue, WA 98004-5901  APPLICATION NO. FILINO DATE				pa	pers. Each additional pape	r, such as an assignmen	t or formal drawing, must	
Exercised to the USPTO (37) 273-285, on the date indicated below.	759	06/11/	/2009				niceion	
Cindy McKee   Chepstow's seed   Cindy McKee   Cind				l h	ereby certify that this Fee	(s) Transmittal is being	deposited with the United	
Bellevue, WA 98004-5901  Cindy McKee (Depositor's sense)  (Cindy McKee (Deposit Account Sense)  (Cindy McKee (Deposit Account Sense)  (Cindy McKee (Deposit Account Sense)  (Cin					States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile			
Bellevue, WA 98004-5901  C113 VICKEE  C13 Compared to the comp		e NF		tra			te indicated below.	
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/712,777 11/12/2009 Terrence W. Schmidt 1934-7-3 7411  TITLE OF INVENTION: MISSION MODULE SHIP DESIGN  APPLICATION: MISSION MODULE SHIP DESIGN  ART UNIT CLASS-SUBCLASS  VASUDEVA, AIAY  Joint 114-258000  L. Change of correspondence address or indication of "Fee Address" (37 CFR 1.53)  Change of correspondence address or indication of "Fee Address" (37 CFR 1.53)  Change of correspondence address or indication of "Fee Address" (37 CFR 1.53)  L. Change of correspondence address or indication of "Fee Address" (37 CFR 1.53)  L. Change of correspondence address or indication of "Fee Address" (37 CFR 1.53)  L. Change of correspondence address or indication of "Fee Address" (37 CFR 1.53)  L. Change of correspondence address or indication of "Fee Address" (37 CFR 1.54)  L. Change of correspondence address or indication of "Fee Address" (37 CFR 1.55)  L. Change of correspondence address or indication of "Fee Address" (37 CFR 1.55)  L. Change of correspondence address or indication of "Fee Address" (37 CFR 1.55)  L. Change of correspondence address or indication of "Fee Address" (37 CFR 1.55)  L. Change of correspondence address or indication of the CFR Address (37 CFR 1.57)  L. Change of correspondence address or indication of the CFR Address (37 CFR 1.57)  L. Change of correspondence address or indication of the CFR Address (37 CFR 1.57)  L. Change of correspondence address or indication of the CFR Address (37 CFR 1.57)  L. Change of correspondence address or indication of the CFR Address (37 CFR 1.57)  D. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, on assignee is desirated address (37 CFR 1.57)  Bethescale				-	Cindy McKee	~70(-)	(Depositor's name)	
APPLICATION NO.   FILING DATE   FIRST NAMED INVENTOR   ATTORNEY DOCKET NO.   CONFIRMATION NO.   10/712,777   11/12/2003   Terrence W. Schmidt   1934-7-3   7411    TITLE OF INVENTION: MISSION MODULE SHIP DESIGN   1934-7-3   7411    APPLIN-TYPE   SMALL ENTITY   ISSUE FEE DUE   PUBLICATION FEE DUE   PREV. FAID ISSUE FEE   TOTAL FEE(S) DUE   DATE DUE   DATE DUE   CLASS SUBCLASS   TOTAL FEE(S) DUE   CLASS SUBCLAS				<u> </u>	- Cook			
TITLE OF INVENTION: MISSION MODULE SHIP DESIGN  APPLA TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE  nonprovisional NO \$1510 \$300 \$0 \$1810 09/11/2009  EXAMINER ART UNIT CLASS-SUBCLASS  VASUDEVA, AJAY 3617 114-258000  1. Change of correspondence address or indication of "Fee Address." Indication form  CRIS. 1.60 and the patient of the patient front page, list  (1) the names of up to 3 registered patient attorneys or agents. Provided patient attorneys or agents. Provided patient attorneys or agents. If no name is 1 page and page an	<del></del> _				<del></del>			
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nonprovisional NO \$1510 \$300 \$0 \$1810 09/11/2009  EXAMINER ART UNIT CLASS-SUBCLASS  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.361).  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  Change of correspondence address or Change of Correspondence at a substitute for fining an assignment.  CA hadden from PTO/SB/123 attached.  Change of Correspondence address or Change of Correspondence and PTO/SB/123 attached.  Change of Correspondence address or Change of Correspondence and PTO/SB/123 attached.  Change of Correspondence address or Change of Correspondence and PTO/SB/123 attached.  Change	·		HIP DESIGN	Terrence W. Schmidt		1934-7-3	7411	
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CLASS-SUBCLAS    VASUDEVA, AJAY   3617   114-258000     1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).   Change of correspondence address (or Change of Correspondence Address or indication for "Fee Address" (10) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the names of up to 3 registered patent attorneys or agents of R, alternatively, (2) the names of up to 3 registered patent attorneys or agents. If no name is 1 required.   1 Kevin D. Jablonski Graybeal Jackson LLP (2) the names of up to 3 registered patent attorneys or agents. If no name is 1 listed, no name will be printed.   3 ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.	nonprovisional	NO	\$1510	\$300	\$0	\$1810	09/11/2009	
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CR 1.363).  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  (1) "Fee Address" indication (or "Fee Address" Indication form PTO/SB/122) attached.  (2) the names of up to 3 registered patent attorneys or agents OR, alternatively, 20 the names of up to 3 registered attorney or agent) and the names of up to 7 registered patent attorneys or agents OR, alternatively, 20 the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 and 1 the names of up to 3 registered patent attorneys or agents OR, alternatively, 20 the name of a single firm (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agents OR, alternatively, 20 the name of a single firm (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agents OR, alternatively, 20 the name of a single firm (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agents OR, alternatively, 20 the names of up to 3 registered patent attorneys or agents OR, alternatively, 20 the names of up to 5 registered patent attorneys or agents OR, alternatively, 20 the names of up to 5 registered patent attorneys or agents OR, alternatively, 20 the names of up to 5 registered patent attorneys or agents OR, alternatively, 20 the names of up to 5 registered attorney or agent, and the names of up to 5 registered attorney or agent, and the names of up to 5 registered attorney or agent, and the names of up to 5 registered attorney or agent, and the names of up to 5 registered attorney or agent, and the names of up to 5 registered attorney or agent, and the names of up to 5 registered attorney or agent, or the assignment are registered attorney or agent, and the names of up to 5 registered attorney or agent, or the assignment are registered attorney or agent, or the patent national patent n	VASUDEVA,	AJAY	3617	114-258000	-		D)	
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The Address' indication for "Fee Address' Indication form PTO/SB47; Rev 03-02 or more recent) attached. Use of a Customer PTO/SB47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.  (A) NAME OF ASSIGNEE  LOCKheed Martin Corporation  Bethesda, Maryland  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government  4a. The following fee(s) are submitted:  Athereful Status Fee Publication Fee (No small entity discount permitted)  Advance Order - # of Copies  Change in Entity Status (from status indicated above)  Advance Order - # of Copies  Change in Entity Status (from status indicated above)  Authorized Signature  Authorized Signature  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignce or other party in interest as shown by the records of the United States Patent and Trademark Office.  Authorized Signature  Note of the Copies of the United States Patent and Trademark Office.  Authorized Signature  Note of the Copies of the United States Patent and Trademark Office.  Authorized Signature  Note of the Copies of the United States Patent and Trademark Office.  Authorized Signature  Note of the Copies of the United States Patent and Trademark Office.  Authorized Signature  Note of the Copies of the United States Patent and Trademark Office.  Patent States Pate	- Total	ence address (or Chai	nge of Correspondence	(1) the names of up to or agents OR, alternate	o 3 registered patent attor ively,			
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CPR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Lockheed Martin Corporation  Bethesda, Maryland  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual © Corporation or other private group entity Osvernment  4a. The following fee(s) are submitted:  A the following fee(s) are submitted:  Publication Fee (No small entity discount permitted)  A check is enclosed.  Pupment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 0.7 - 18.97 (enclose an extra copy of this form).  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.  Authorized Signature  Authorized Signature  Date  Mey 11 July 23, 2009  Typed or printed name  Kevin D. Jablonski  Registration No. 50, 401  This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time wil				(2) the name of a sing	gle firm (having as a mem			
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Advance Order - # of Copies							10	
overpayment, to Deposit Account Number 07-1897 (enclose an extra copy of this form).  5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignce or other party in interest as shown by the records of the United States Patent and Trademark Office.  Authorized Signature  Typed or printed name  Kevin D. Jablonski  Registration No. 50, 401  This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandra, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450,	Publication Fee (No sr	nall entity discount p	ermitted)					
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.   b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.  Authorized Signature  Typed or printed name    Nevin D. Jablonski   Date   July 23, 2009	Advance Order - # of	Copies						
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